PTO/SB/01 (03-01) Approved for use through 10/31/2002. OMB 0651-0032

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. **GKNG 1273 PCT** Attorney Docket Number **DECLARATION FOR UTILITY OR** STEPHAN MAUCHER ET AL. First Named Inventor **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) APPLIED FOR Application Number **HEREWITH** Filing Date Declaration Declaration Submitted after Initial Submitted OR Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing

\		requirea)	Examiner Name	<u></u>	
	As a below named inventor, I he	reby declare that:		<u> </u>	
	My residence, mailing address, an	d citizenship are as stat	ed below next to my nam	ie.	
	I believe I am the original, first and names are listed below) of the sub	l sole inventor (if only or ject matter which is clai	ne name is listed below) omed and for which a pate	or an original, first ent is sought on th	and joint inventor (if plural ne invention entitled:
	COUNTER TRACK JOINT WIT	H OPTIMIZED BUILDIN	G SPACE		
		(Title of t	he Invention)		
	the specification of which	(Tide Of t	ne invention		
	is attached hereto				
	OR was filed on (MM/DD/YYYY)		as United St	ates Application I	Number or PCT International
	Application Number	and was a	amended on (MM/DD/YY	YY)	(if applicable).
	I hereby state that I have reviewed amended by any amendment specific	d and understand the co	ntents of the above ident e.	ified specification	, including the claims, as
	I acknowledge the duty to disclose in-part applications, material inform PCT international filing date of the	nation which became av	/ailable between the filing	defined in 37 CFI date of the prior	R 1.56, including for continuation- application and the national or
	I hereby claim foreign priority ben or plant breeder's rights certificat than the United States of Americ patent, inventor's or plant breede application on which priority is clai	efits under 35 U.S.C. 1 e(s), or 365(a) of any F a, listed below and hav 's rights certificate(s), o	19(a)-(d) or (f), or 365(b) PCT international application and security of the	ition which design by checking the	box, any foreign application for
-	Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
P	CT/EP 2004/012379	EPO	11/02/2004		
Ī	Additional foreign application	numbers are listed on a	supplemental priority da	ta sheet PTO/SB	/02B attached hereto:

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer N or Bar Code		1 027230 1 0 2 1 0 1 Co			rrespondence address below	
ROBERT P. RENKE ARTZ & ARTZ, P.C. Name						
28333 TELEGRAPH ROAD SUITE 250 Address						
SOUTHFIELD City	MI e	ZIP 48034				
U.S.A. Country	Telep	248-223 ohone	-9500		248-223-9522 Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR :	NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor					
Given Name STEPI (first and middle [if any])	HAN			ily Name urname	MAUCHER	
Inventor's Signature			_		Date	
SIEGBURG Residence: City		State	_	GERMANY Country	GERMAN Citizenship	
SCHARNHORSTSTRASSE 6 Mailing Address						
City		State		D-53721 ZIP	GERMANY Country	
NAME OF SECOND INVENTOR:		A petition ha	s bee	n filed for this unsi	gned inventor	
Given Name DR. WOL (first and middle [if any])	.FGAN	3		ly Name ırname	HILDEBRANDT	
Inventor's Signature					Date	
SIEGBURG Residence: City		State		GERMANY Country	GERMAN Citizenship	
AGGERSTRASSE 50 Mailing Address						
SIEGBURG		State		D-53721 ZIP	GERMANY Country	
Additional inventors are being named on the $\underline{1}$	sup	plemental Addition	onal In	ventor(s) sheet(s) PTO	/SB/02A attached hereto.	

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ADDITIONAL INVENTOR(S)

DECLARATION		Supplemental	Sheet	Pag	ne 3 of 3	
Name of Additional Joint Inventor, if an	y:	A petition	n has been filed for	this unsigned	inventor	
Given Name (first and middle (if any)		Family Name o	r Surname	· · · · · · · · · · · · · · · · · · ·		
ANNA	2	GREMMELMAIER				
Inventor's Signature				Date		
SANKT AUGUSTIN Residence: City	State		RMANY	GERM Citize	AN enship	
BOELCKE STRASSE 18						
Mailing Address						
SANKT AUGUSTIN City	State		D-53757 Zip	GERM Coun		
Name of Additional Joint Inventor, if an	y:	A petition	n has been filed for	this unsigned	inventor	
Given Name (first and middle (if any))		Family Nam	ne or Surname		
IDA		HASSENRIK				
Inventor's Signature			·	Date	y	
TROISDORF			GERMANY		GERMAN	
Residence: City	State		Country	<u></u>	Citizenship	
IM KALTSIEFEN 17 Mailing Address						
TROISDORF			D-53842	GERM	ANY	
City	State		Zip	Coun		
Name of Additional Joint Inventor, if an	y:	A petition	has been filed for	this unsigned	inventor	
Given Name (first and middle (if any))	Family Name or Surname				
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Inventor's Signature				Date		
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Residence: City	State		Louining		- Outenand	
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City	State		Zip	Loun	u y	

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Application Number	APPLIED FOR
Filing Date	HEREWITH
First Named Inventor	STEPHAN MAUCHER, ET AL.
Title	COUNTER TRACK JOINT WITH OPTIMIZED BUILDING SPACE
Art Unit	
Examiner Name	
Attorney Docket Number	GKNG 1273 PCT

I hereby revoke al	l previc	ous powers of attorney give	en in the abo	ove-ide	entified applica	ation.	
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		the entire interest. See 37 CFR 3 FR 3.73(b) is enclosed. (Form P					
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Signature	STEPH/	AN MAUCHER				Date	
Name						Telephone	
Title and Company							
NOTE: Signatures of all the signature is required, see		rs or assignees of record of the entire	e interest or their i	representa	ative(s) are required	d. Submit mu	Iltiple forms if more than one
*Total of 4	*Total of 4 forms are submitted.						

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Art Unit	
Examiner Name	
Attorney Docket Number	GKNG 1273 PCT

I hereby revoke	all previo	ous powers of attorney given	ven in the abo	ve-ide	entified applic	ation.		
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	Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
		SIGNATURE of	Applicant or As	signee	of Record	_		
Signature	DR. WO	OLFGANG HILDEBRANDT				Date		
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Title and Company								
NOTE: Signatures of a signature is required, s		ors or assignees of record of the enti	ire interest or their r	epresent	ative(s) are require	ed. Submit m	nultiple forms if more the	an one
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Examiner Name	
Attorney Docket Number	GKNG 1273 PCT

I hereby revoke a	Il previo	us powers of attorney giv	en in the ab	ove-ide	entified applic	cation.		
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Statement ui	nder 37 Ci	FR 3.73(b) is enclosed. (Form I	PTO/SB/96)					
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Signature	ANNA G	REMMELMAIER				Date		
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Examiner Name	
Attorney Docket Number	GKNG 1273 PCT

I hereby revoke all previous powers of attorney given in the above-identified application.								
I hereby appoint:								
Practitioners as	sociated v	with the Customer Number:		027	256			
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Practitioner(s)	Practitioner(s) named below:							
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as my/our attorney(s) Trademark Office con	or agent(s	s) to prosecute the application is	identified above	, and to t	ransact all busi	ness in the	United States Patent and	
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		he entire interest. See 37 CFR	3.71.					
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		SIGNATURE of	Applicant or A	ssignee	of Record			
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NOTE: Signatures of all t signature is required, see		s or assignees of record of the enti	re interest or their	represent	ative(s) are requir	ed. Submit m	nultiple forms if more than one	
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